

DECLARATION FOR USA PATENT APPLICATION

(Including Design and National Stage PCT)

Attny's Dckt ID: P07389US00/LRP

As a below named inventor, I hereby declare that:

My residence, mailing address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention

entitled: **MEDICINAL COMPOSITIONS AND THEIR METHOD OF PREPARATION**

the specification of which:

is attached hereto

(or)

☒ was filed on 10 April 2000 as PCT International Application No. PCT/AU00/00300 (Nationalized on 09 October 2001 as U.S.S.N. 09/956,333).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim FOREIGN PRIORITY benefits under 35 USC 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the US, listed below and have also identified below, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. (ADDITIONAL APPLICATIONS IDENTIFIED ON ADDITIONAL INFORMATION SHEET)Prior Foreign Appl. No.
PP 9686Country
AUDay/Month/Year Filed
09 April 1999Priority Not ClaimedI hereby claim the benefit under 35 USC 119(e) of any US PROVISIONAL application(s) listed below. (ADDITIONAL APPLICATIONS IDENTIFIED ON ADDITIONAL INFORMATION SHEET)

U.S. Provisional Application No.

Parent Filing Date (Day/Month/Year)

I hereby claim the (CONTINUATION) benefit under 35 USC 120 of any US application(s), or under 365(c) of any PCT application designating the US, listed below. (ADDITIONAL APPLICATIONS IDENTIFIED ON ADDITIONAL INFORMATION SHEET)

U.S. or PCT Parent Application No.

Parent Filing Date (Day/Month/Year)

Parent Patent No. (if applicable)

As a named inventor, I hereby appoint the registered practitioners of LARSON & TAYLOR, PLC associated with Customer Number 000881 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to that Customer Number.

Direct all telephone calls to B. Aaron Schulman

at TEL (703) 739-4900

(Fax: 703-739-957)

E-mail: bschulman@larsontaylor.com

I hereby declare that all statements made herein of my own knowledge are true and valid, and that I have made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and perjury are punishable by fine or imprisonment, or both, under 18 USC 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGN HERE

SOLE OR FIRST INVENTOR		Citizenship	AU
Given Name (first and Middle (if any))		Family Name or Surname	CHAM
Full Mailing Address			
353 Woodlands Drive, Sheldon, QLD 4157, AUSTRALIA			
Residence - City, State/Country (if different from PO address)			
"same as above"			
SIGN AND DATE HERE Inventor's Signature		Date	
<i>[Signature]</i>		17/12/01	
SECOND JOINT INVENTOR (if any)		Citizenship	
Given Name (first and Middle (if any))		Family Name or Surname	
Full Mailing Address			
Residence - City, State/Country (if different from PO address)			
SIGN AND DATE HERE Inventor's Signature		Date	
THIRD JOINT INVENTOR (if any)		Citizenship	
Given Name (first and Middle (if any))		Family Name or Surname	
Full Mailing Address			
Residence - City, State/Country (if different from PO address)			
SIGN AND DATE HERE Inventor's Signature		Date	
FOURTH JOINT INVENTOR (if any)		Citizenship	
Given Name (first and Middle (if any))		Family Name or Surname	
Full Mailing Address			
Residence - City, State/Country (if different from PO address)			
SIGN AND DATE HERE Inventor's Signature		Date	

(ADDITIONAL INVENTORS IDENTIFIED ON ADDITIONAL INFORMATION SHEET)

LARSON & TAYLOR, PLC • 1199 North Fairfax Street • Suite 900 • Alexandria Virginia 22314

3/01

BEST AVAILABLE COPY